

## Release and Waiver of Liability and Indemnity Agreement

(Read Carefully Before Signing)

In consideration of being permitted to participate in any way in the **Rich Rodriguez Specialist Camp** (the "Program") and/or being permitted to enter for any purpose any restricted area (herein defined as any area where in admittance to the general public is prohibited), the undersigned, or, if the undersigned is a minor, the parent(s) and/or legal guardian(s) of the undersigned, agree as follows:

1. I certify that the Participant (as identified below) is voluntarily and at his or her own risk participating in the Program. I certify that I am aware of all of the inherent risks and dangers of the associated activities and that participants may sustain mortal or serious personal injuries as a consequence of activities connected therewith. Knowing the associate risks, I hereby assume full responsibility for and the risk of bodily injury, death or property damage due to the acts or omissions of the Released Parties (defined below) or otherwise, in connection with the Program. I am aware that the social and economic losses and/or damages which could result from these risks and dangers described above could be severe. I am aware that these risks and dangers may be caused by the action, inaction, or negligence of the Participant or the action, inaction, or negligence of others, including, but not limited to, the Released Parties named below. I am aware that there may be other risks not known or are not reasonably foreseeable at this time. I accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis, or death. I expressly acknowledge that injuries received may be in whole or in part by the negligence of the Released Parties named below. I expressly acknowledge that injuries received may be compounded or increased by negligent rescue operations or procedures of the Released Parties.
2. I have been advised that, prior to participating in the Program, the Participant should inspect the facilities and equipment to be used in connection with the Program, and if the Participant believes any facilities and/or equipment to be unsafe, the Participant should immediately advise the officials of such condition and refuse to participate. If at any time during the Program, the Participant feels anything to be unsafe, the Participant will immediately take all precautions to avoid the unsafe area and refuse to participate further. If the Participant is a minor, the undersigned parent(s) and/or legal guardian(s) of the Participant will instruct the Participant that, prior to participating in the Program, he or she should inspect the facilities and equipment to be used in connection with the Program, and if he or she believes any facilities and/or equipment to be unsafe, the Participant should immediately advise the officials of such condition and refuse to participate.
3. In consideration of being allowed to participate in the program, I hereby release, waive, discharge, and covenant not to sue (i) Rich Rodriguez Football Camps, LLC, (ii) the University of Arizona, (iii) the facility used by Participant in connection with the Program (the "Facility"), (iv) the Facility's owners, promoters, lessees, premises, and event inspectors, underwriters, consultants, and others who give recommendations, directions, or instructions to engage in risk evaluation or loss control activities regarding the Facility or events held at such Facility and/or (v) any of their owners, managers, promoters, agents, representatives, employees, contractors, officers, directors, trustees, successors, and assigns (collectively, the "Released Parties") from all liability to me, my personal representatives, assigns, executors, heirs, and next of kin for any and all claims, demands, losses, or damages and any claims or demands therefore on account of any injury, including but not limited to Participant's death or damage to property, arising out of or relating to the Program caused or alleged to be caused in whole or in part by the negligence of any Released Party or otherwise.
4. I further expressly agree that the foregoing Release and Waiver of Liability and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the law of the State in which the Program is conducted, and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.
5. **FOR MINOR PARTICIPANTS ONLY.** On behalf of the Participant and individually, the undersigned parent(s) and/or legal guardian(s) for the minor Participant execute this Release and Waiver of Liability and Indemnity Agreement. If, despite this release, the Participant makes a claim against any of the Released Parties, the parent(s) and/or legal guardian(s) will reimburse such Released Parties for any money which they have paid to the Participant, or on his behalf, and hold such Released Parties harmless.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Parent of Guardian Name (if Participant is a minor)

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent of Guardian Signature (if Participant is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Participant Address

\_\_\_\_\_  
Received By

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\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Parent of Guardian Name (if Participant is a minor)

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent of Guardian Signature (if Participant is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Participant Address

\_\_\_\_\_  
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Participant Signature

Date

Parent of Guardian Signature (if Participant is a minor)

Date

Participant Address

Received By

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Participant Name

Parent of Guardian Name (if Participant is a minor)

Participant Signature

Date

Parent of Guardian Signature (if Participant is a minor)

Date

Participant Address

Received By